

Public Health Preparedness and Situational Awareness Report: #2020:27

Reporting for the week ending 07/04/20 (MMWR Week #27)

July 10th, 2020

CURRENT HOMELAND SECURITY THREAT LEVELS

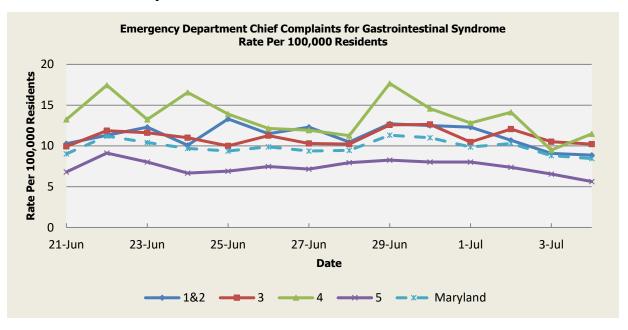
National: No Active Alerts

Maryland: ENHANCED (MEMA status)

SYNDROMIC SURVEILLANCE REPORTS

ESSENCE (Electronic Surveillance System for the Early Notification of Community-based Epidemics): Graphical representation is provided for all syndromes (excluding the "Other" category; see Appendix 1) by Health and Medical Regions (See Appendix 2). Emergency department chief complaint data is presented as rates per 100,000 residents using data from the 2010 census. Electronic Surveillance System for the Early Notification of Community-Based Epidemics (ESSENCE). Baltimore, MD: Maryland Department of Health; 2019.

Gastrointestinal Syndrome

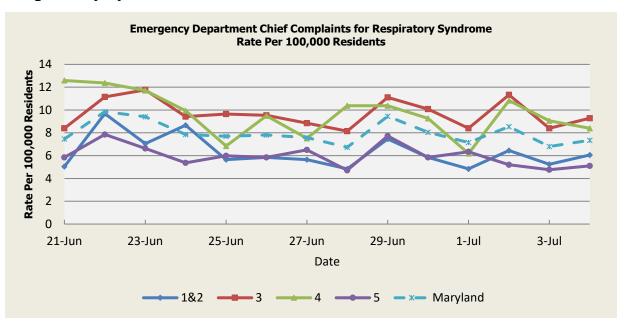


There were no Gastrointestinal Syndrome outbreaks reported this week.

	Gastrointestinal Syndrome Baseline Data January 1, 2010 - Present						
Health Region	1&2						
Mean Rate*	13.26	14.96	15.88	10.22	13.07		
Median Rate*	13.11	14.83	15.46	10.17	13.00		

^{*} Per 100,000 Residents

Respiratory Syndrome

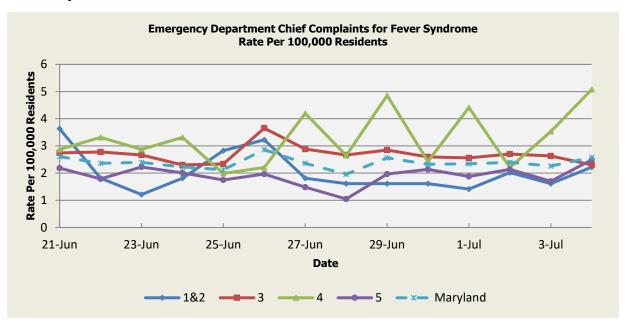


There were seventeen (17) Respiratory Syndrome outbreaks reported this week: three (3) outbreaks of COVID-19 in Assisted Living Facilities (Regions 3,5), three (3) outbreaks of COVID-19 in Daycares (Region 5), one (1) outbreak of COVID-19 in a Drug Treatment Program (Region 3), two (2) outbreaks of COVID-19 in Group Homes (Region 3), four (4) outbreaks of COVID-19 in Hospitals (Regions 3,4), two (2) outbreaks of COVID-19 in a Nursing Homes (Regions 3,5), two (2) outbreaks of COVID-19 in Shelters (Region 3).

	Respiratory Syndrome Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland	
Mean Rate*	12.58	14.87	15.23	10.10	12.88	
Median Rate*	12.10	14.25	14.35	9.69	12.35	

* Per 100,000 Residents

Fever Syndrome

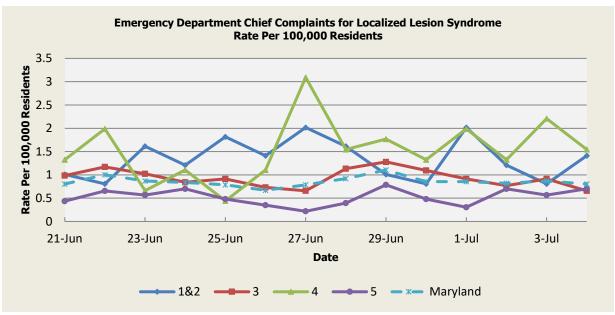


There were no Fever Syndrome outbreaks reported this week.

	Fever Syndrome Baseline Data January 1, 2010 - Present						
Health Region	1&2						
Mean Rate*	3.09	3.92	4.15	3.06	3.54		
Median Rate*	3.02	3.80	3.97	2.92	3.41		

*Per 100,000 Residents

Localized Lesion Syndrome

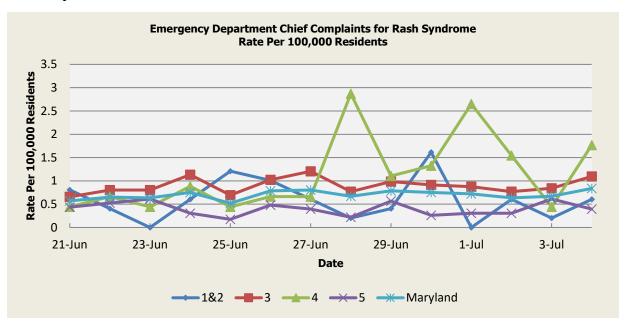


There were no Localized Lesion Syndrome outbreaks reported this week.

	Localized Lesion Syndrome Baseline Data January 1, 2010 - Present							
Health Region	1&2							
Mean Rate*	1.16	1.73	2.00	0.88	1.38			
Median Rate*	1.01	1.68	1.99	0.87	1.34			

^{*} Per 100,000 Residents

Rash Syndrome

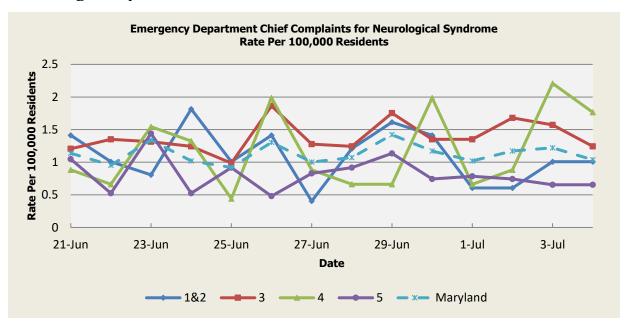


There were no Rash Syndrome outbreaks reported this week.

	Rash Syndrome Baseline Data January 1, 2010 - Present						
Health Region	1&2						
Mean Rate*	1.23	1.63	1.71	0.95	1.34		
Median Rate*	1.21	1.57	1.55	0.92	1.31		

^{*} Per 100,000 Residents

Neurological Syndrome

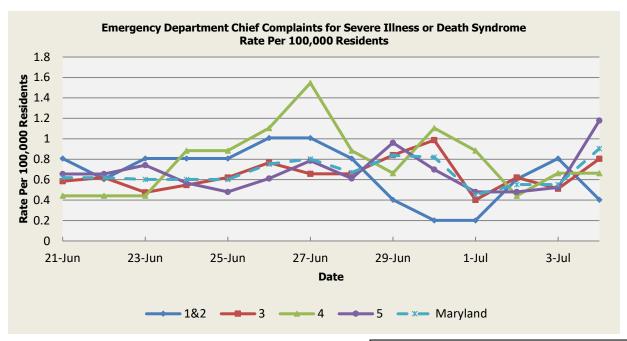


There were no Neurological Syndrome outbreaks reported this week.

	Neurological Syndrome Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland	
Mean Rate*	0.81	0.99	0.91	0.63	0.83	
Median Rate*	0.81	0.91	0.88	0.57	0.77	

^{*} Per 100,000 Residents

Severe Illness or Death Syndrome



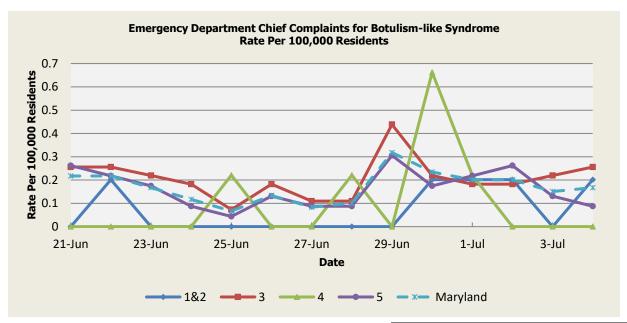
There were no Severe Illness or Death Syndrome outbreaks reported this week.

	Severe Illness or Death Syndrome Baseline Data January 1, 2010 - Present						
Health Region	1&2	3	4	5	Maryland		
Mean Rate*	0.65	0.88	0.84	0.53	0.73		
Median Rate*	0.60	0.84	0.88	0.48	0.70		

^{*} Per 100,000 Residents

SYNDROMES RELATED TO CATEGORY A AGENTS

Botulism-like Syndrome

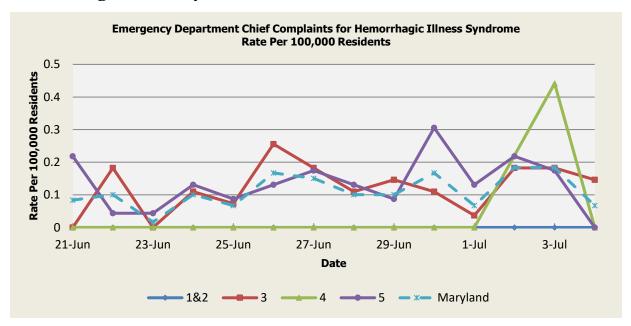


There was an appreciable increase above baseline in the rate of ED visits for Botulism-like Syndrome on, 6/21 (Region 5), 6/22 (Regions 1&2,5), 6/23 (Region 5), 6/25 (Region 4), 6/28 (Region 4), 6/29 (Regions 3,5), 6/30 (Regions 1&2,4,5), 7/1 (Regions 1&2,4,5), 7/2 (Regions 1&2,5), 7/4 (Regions 1&2). These increases are not known to be associated with any outbreaks.

	Botulism-like Syndrome Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland	
Mean Rate*	0.08	0.13	0.06	0.08	0.10	
Median Rate*	0.00	0.11	0.00	0.04	0.08	

^{*} Per 100,000 Residents

Hemorrhagic Illness Syndrome

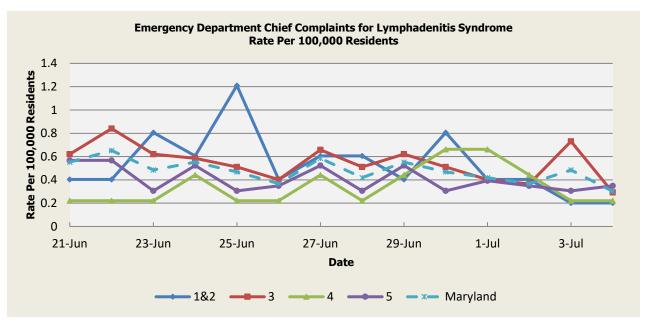


There was an appreciable increase above baseline in the rate of ED visits for Hemorrhagic Illness Syndrome on, 6/30 (Region 5), 7/2 (Region 4), 7/3 (Region 4). These increases are not known to be associated with any outbreaks.

	Hemorrhagic Illness Syndrome Baseline Data January 1, 2010 - Present							
Health Region	1&2	3	4	5	Maryland			
Mean Rate*	0.05	0.17	0.04	0.15	0.14			
Median Rate*	0.00	0.11	0.00	0.09	0.10			

^{*} Per 100,000 Residents

Lymphadenitis Syndrome



There was an appreciable increase above baseline in the rate of ED visits for Lymphadenitis Syndrome on 6/23 (Regions 1&2), 6/25 (Regions 1&2), 6/30 (Regions 1&2). These increases are not known to be associated with any outbreaks.

	Lymphadenitis Syndrome Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland	
Mean Rate*	0.39	0.60	0.40	0.39	0.49	
Median Rate*	0.40	0.55	0.44	0.35	0.45	

^{*} Per 100,000 Residents

MARYLAND REPORTABLE DISEASE SURVEILLANCE

Coronavirus Disease 2019 (COVID-19) Situation Summary

On March 5th, 2020, the Maryland Department of Health announced the first cases of coronavirus disease 2019 (abbreviated COVID-19) in the State of Maryland.

Confirmed COVID-19 Case Counts in Maryland by County (As of July 10th, 2020)

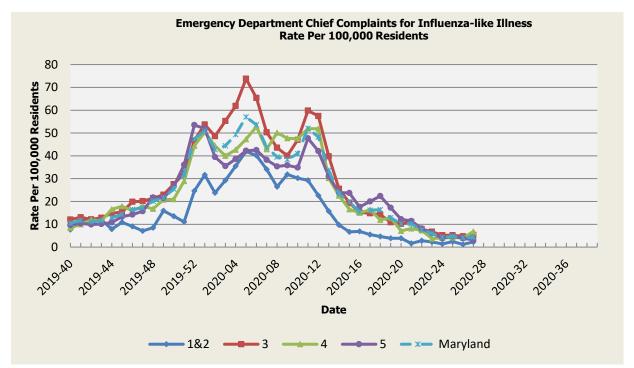
County	Number of
	Confirmed Cases
Allegany	213
Anne Arundel	5,423
Baltimore City	8,249
Baltimore County	8,581
Calvert	438
Caroline	332
Carroll	1,200
Cecil	518
Charles	1,496
Dorchester	203
Frederick	2,577
Garrett	19
Harford	1,246
Howard	2,770
Kent	204
Montgomery	15,568
Prince George's	19,510
Queen Anne's	273
Somerset	98
St. Mary's	679
Talbot	170
Washington	710
Wicomico	1,119
Worcester	314
Total	71,910

The most up-to-date information may be found on the Maryland Department of Health website at https://coronavirus.maryland.gov.

SYNDROMIC INFLUENZA SURVEILLANCE

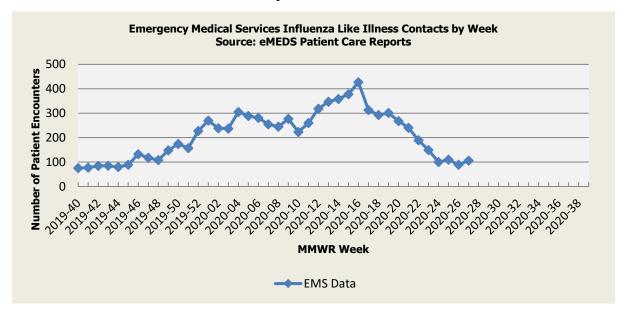
Seasonal Influenza reporting occurs from MMWR Week 40 through MMWR Week 20 (October 2019 through May 2020). **Due to the COVID-19 pandemic, influenza reporting will be extended to the beginning of the 2020-2021 reporting season (MMWR Week 40/Week Ending October 3, 2020).**

Influenza-like Illness



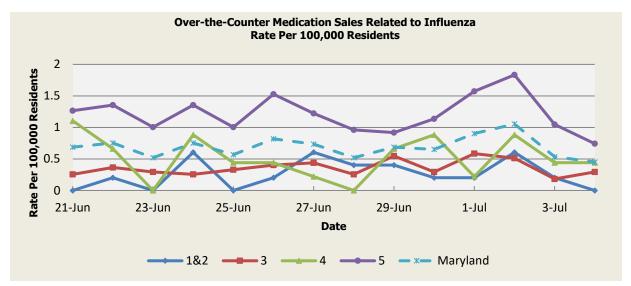
	Influenza-like Illness Baseline Data Week 1 2010 - Present							
Health Region	1&2	1&2 3 4 5 Maryland						
Mean Rate*	10.49	14.31	13.60	12.11	13.09			
Median Rate*	7.66	7.66 10.61 9.61 9.02 9.71						
* Per 100,000 Residents								

Influenza-like Illness Contacts by Week



Disclaimer on eMEDS flu related data: These data are based on EMS Pre-hospital care reports where the EMS provider has selected "flu like illness" as a primary or secondary impression of a patient's illness. This impression is solely based on the signs and symptoms seen by the provider, not on any diagnostic tests. Since these numbers do not include all primary or secondary impressions that may be seen with influenza the actual numbers may be low. These data are reported for trending purposes only.

Over-the-Counter Influenza-Related Medication Sales

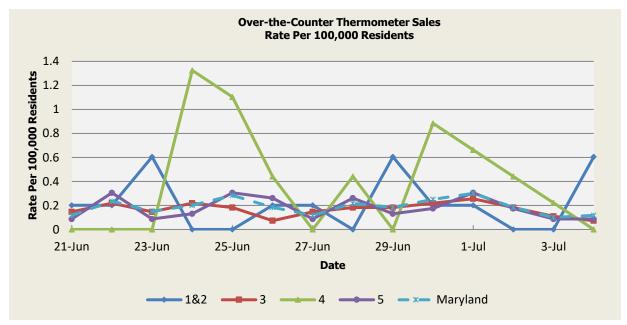


There was no appreciable increase above baseline in the rate of OTC Medication Sales during this reporting period.

	OTC Medication Sales Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	3.36	4.29	2.61	7.66	5.38
Median Rate*	2.62	3.36	2.21	6.90	4.62

^{*} Per 100,000 Residents

Over-the-Counter Thermometer Sales



There was no appreciable increase above baseline in the rate of OTC Thermometer Sales during this reporting period.

	Thermometer Sales Baseline Data January 1, 2010 - Present				
Health Region	1&2	3	4	5	Maryland
Mean Rate*	2.80	2.65	2.13	3.52	2.96
Median Rate*	2.42	2.59	1.99	3.49	2.94

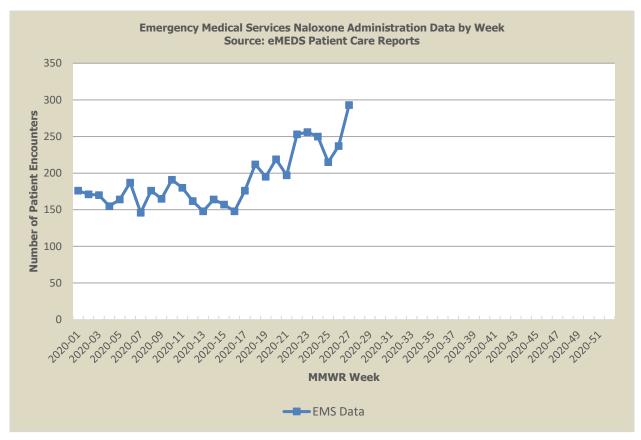
^{*} Per 100,000 Residents

SYNDROMIC OVERDOSE SURVEILLANCE

The purpose of this section is to characterize non-fatal ED visit trends for acute unintentional overdose by Heroin, Opioid or Unspecified substance among Maryland residents captured by ESSENCE data, including chief complaint and discharge diagnosis. ED visits that are identified as unintentional overdose by Heroin, Opioid or Unspecified substance include those with medical and non-medical use of a prescription Opioid or where the substance is not specified, given evidence that most fatal overdoses are Opioid-related.

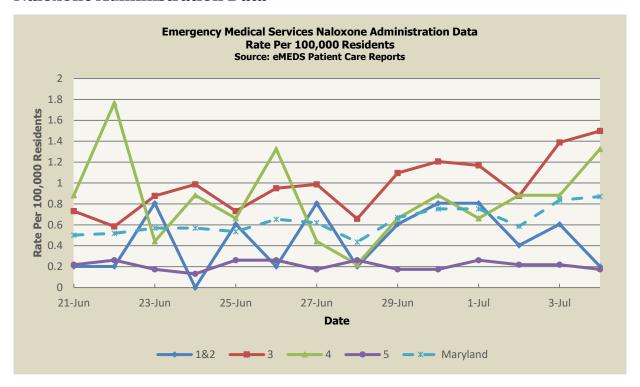
In preparation for the release of new ESSENCE queries for identifying heroin, opioid and all drug overdoses, please note that we have removed the data chart showing unintentional overdose rates by heroin, opioid, or unspecified substances. These new data, when available, will be presented below.

Naloxone Administration Data by Week



Disclaimer on eMEDS naloxone administration related data: These data are based on EMS Pre-hospital care reports where the EMS provider has documented that they administered naloxone. The administration of naloxone is based on the patient's signs and symptoms and not on any diagnostic tests. These data are reported for trending purposes only.

Naloxone Administration Data



Disclaimer on eMEDS Naloxone administration related data: These data are based on EMS Pre-hospital care reports where the EMS provider has documented that they administered naloxone. The administration of naloxone is based on the patient's signs and symptoms and not on any diagnostic tests. These data are reported for trending purposes only.

PANDEMIC INFLUENZA UPDATE / AVIAN INFLUENZA-RELATED REPORTS

WHO update: The current WHO phase of pandemic alert for avian influenza is ALERT. Currently, the avian influenza H5N1 virus continues to circulate in poultry in some countries, especially in Asia and northeast Africa. This virus continues to cause sporadic human infections with some instances of limited human-to-human transmission among very close contacts. There has been no sustained human-to-human or community-level transmission identified thus far.

Influenza A (H7N9) is one of a subgroup of influenza viruses that normally circulate among birds. Until recently, this virus had not been seen in people. However, human infections have now been detected. Presently, there is limited information about the scope of the disease the virus causes and about the source of exposure. The disease is of concern because most patients have been severely ill. There is no indication thus far that it can be transmitted between people, but both animal-to-human and human-to-human routes of transmission are being actively investigated.

Alert phase: This is the phase when influenza caused by a new subtype has been identified in humans. Increased vigilance and careful risk assessment, at local, national, and global levels are characteristic of this phase. If the risk assessments indicate that the new virus is not developing into a pandemic strain, a de-escalation of activities towards those in the interpandemic phase may occur. As of July 10th, 2020, the WHO-confirmed global total (2003-2020) of human cases of H5N1 avian influenza virus infection stands at 861, of which 455 have been fatal. Thus, the case fatality rate for human H5N1 is approximately 53%.

AVIAN INFLUENZA

There were no relevant avian influenza reports this week

HUMAN AVIAN INFLUENZA

There were no relevant human avian influenza reports this week

NATIONAL DISEASE REPORTS

CORONAVIRUS DISEASE 2019 UPDATE (**TEXAS**), 8 July 2020, A Tarrant County dog was confirmed to be infected with SARS-CoV-2, the virus causing COVID-19 in humans, on 7 Jul 2020 by the U.S. Department of Agriculture (USDA) National Veterinary Services Laboratories (NVSL). Read More: https://promedmail.org/promed-post/?id=7554832

ANAPLASMOSIS (**MICHIGAN**), 8 July 2020, As if we don't already have already have enough worries, health officials are warning Michiganders to guard against a tick-borne disease that mimics COVID-19 symptoms. Read More: https://promedmail.org/promed-post/?id=7554657

WEST NILE VIRUS (FLORIDA), 7 June 2020, Health officials in Miami-Dade County, Florida, on Saturday [4 Jul 2020] confirmed that at least 18 people living in the county have contracted the West Nile virus. Read More: https://promedmail.org/promed-post/?id=7546849

JAMESTOWN CANYON VIRUS (NEW HAMPSHIRE), 4 July 2020, Health authorities from New Hampshire have reported the 1st case of the seasonal Jamestown Canyon virus (JCV) [this year (2020)]. Read More: https://promedmail.org/promed-post/?id=7540613

INTERNATIONAL DISEASE REPORTS

JAPANESE ENCEPHALITIS (**TAIWAN**), 8 July 2020, Taiwan is currently in the peak season for Japanese encephalitis, with 5 new cases confirmed around the country recently, according to a statement issued Tuesday [7 Jul 2020] by the [Taiwan] Centers for Disease Control (CDC). Read More: https://promedmail.org/promed-post/?id=7551332

INFANT BOTULISM (**TAIWAN**), 7 July 2020, The Centers for Disease Control (CDC) yesterday [6 Jul 2020] reported the nation's 1st case of infant botulism in 2020, a 4-month-old boy in northern Taiwan. Read More: https://promedmail.org/promed-post/?id=7550765

PLAGUE (DEMOCRATIC REPUBLIC OF CONGO), 7 July 2020, On 4 Jul 2020, 3 suspected cases (including one death) of bubonic plague were reported to the Ituri Provincial Health Division by the Kumudhu Health Centre head nurse (Aru Health District), Ituri Province, Democratic Republic of Congo (DRC). Read More: https://promedmail.org/promed-post/?id=7546991

PLAGUE (CHINA), 6 July 2020, According to the Bayannur City Health Commission, on 5 Jul 2020, a herdsman in Wengen Town, Wulatezhongqi, Bayannur City [Inner Mongolia], was diagnosed as a case of bubonic plague by the expert team during the consultation in the Wulatezhongqi People's Hospital. Read More: https://promedmail.org/promed-post/?id=7543168

PRION DISEASE (**FRANCE**), 5 July 2020, A young lab technician in France developed a rare and fatal brain disease after she was accidentally exposed to prions, the infectious proteins that cause "mad cow disease," according to a new report of the case. Read More: https://promedmail.org/promed-post/?id=7540209

EBOLA UPDATE (DEMOCRATIC REPUBLIC OF CONGO), 4 July 2020, The epidemiological situation of the Ebola virus disease in the province of Equateur dated 30 Jun 2020. Read More: https://promedmail.org/promed-post/?id=7540595

DIPHTHERIA (**VIETNAM**), 3 July 2020, The Central Highlands province of Kon Tum on Monday evening [29 Jun 2020] reported 3 cases of diphtheria, bringing the total number in the province since the beginning of this year [2020] to 8. Read More: https://promedmail.org/promed-post/?id=7535560

OTHER RESOURCES AND ARTICLES OF INTEREST

More information concerning Public Health and Emergency Preparedness can be found at the Office of Preparedness and Response website: http://preparedness.health.maryland.gov/ or follow us on Facebook at www.facebook.com/MarylandOPR.

More data and information on influenza can be found on the MDH website: http://phpa.health.maryland.gov/influenza/fluwatch/Pages/Home.aspx

Please participate in the Maryland Resident Influenza Tracking System (MRITS): http://flusurvey.health.maryland.gov

NOTE: This weekly review is a compilation of data from various surveillance systems, interpreted with a focus on a potential BT event. It is not meant to be inclusive of all epidemiology data available, nor is it meant to imply that every activity reported is a definitive BT event. International reports of outbreaks due to organisms on the CDC Critical Biological Agent list will also be reported. While not "secure", please handle this information in a professional manner. Please feel free to distribute within your organization, as you feel appropriate, to other professional staff involved in emergency preparedness and infection control.

For questions about the content of this review or if you have received this and do not wish to receive these weekly notices, please e-mail us. If you have information that is pertinent to this notification process, please send it to us to be included in the routine report.

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Appendix 1: ESSENCE Syndrome Definitions and Associated Category A Conditions

Syndrome	ESSENCE Definition	Category A Conditions
Botulism-like	(Botulism or (DifficultyFocusing and DifficultySpeaking) or (DifficultySpeaking and DifficultySwallowing) or (DifficultySwallowing and DifficultyFocusing) or DoubleVision or FacialParalysis or GuillainBarre or Ptosis) and not GeneralExclusions	Botulism
Fever	(Chills or (FeverPlus and (Drowsiness or Seizure)) or FeverOnly or SepsisGroup or ViralSyndrome) and not GeneralExclusions	N/A
Gastrointestinal	(AbdominalCramps or AbdominalPainGroup or Diarrhea or FoodPoisoning or Gastroenteritis or GIBleeding or Peritonitis or Vomiting) and not (GeneralExclusions or Gynecological or Obstetric or Reproductive or UrinaryTract)	Anthrax (gastrointestinal)
Hemorrhagic Illness	(FeverOrChills and (AcuteBloodAbnormalitiesGroup or BleedingFromMouth or BleedingGums or GIBleeding or Hematemesis or Hemoptysis or Nosebleed or Petechiae or Purpura)) and not GeneralExclusions	Viral Hemorrhagic Fever
Localized Lesion	(Boils or Bump or Carbuncle or DepressedUlcer or Eschar or Furuncle or InsectBite or SkinAbscess or (SkinSores and not AllOverBody) or SkinUlcer or SpiderBite) and not (GeneralExclusions or Decubitus or Diabetes or StasisUlcer)	Anthrax (cutaneous) Tularemia
Lymphadenitis	(BloodPoisoning or Bubo or CatScratchDisease or SwollenGlands) and not GeneralExclusions	Plague (bubonic)
Neurological	(([Age<75] and AlteredMentalStatus) or (FeverPlus and (Confusion or Drowsiness or Petechiae or StiffNeck)) or Delirium or Encephalitis or Meningitis or UnconsciousGroup) and not GeneralExclusions	N/A
Rash	(ChickenPox or Measles or RashGeneral or Roseola or (Rubella and not Pregnancy) or Shingles or (SkinSores and AllOverBody) or Smallpox) and not GeneralExclusions	Smallpox
Respiratory	(Anthrax or Bronchitis or (ChestPain and [Age<50]) or Cough or Croup or DifficultyBreathing or Hemothorax or Hypoxia or Influenza or Legionnaires or LowerRespiratoryInfection or Pleurisy or Pneumonia or RespiratoryDistress or RespiratoryFailure or RespiratorySyncytialVirus or RibPain or ShortnessOfBreath or Wheezing) and not (GeneralExclusions or Cardiac or (ChestPain and Musculoskeletal) or Hyperventilation or Pneumothorax)	
Severe Illness or Death	CardiacArrest or CodeGroup or DeathGroup or (Hypotension and FeverPlus) or RespiratoryArrest or SepsisGroup or Shock	N/A

Appendix 2: Maryland Health and Medical Region Definitions

Health and Medical Region	Counties Reporting to ESSENCE		
	Allegany County		
Pagions 1 & 2	Frederick County		
Regions 1 & 2	Garrett County		
	Washington County		
	Anne Arundel County		
	Baltimore City		
Region 3	Baltimore County		
Region 3	Carroll County		
	Harford County		
	Howard County		
	Caroline County		
	Cecil County		
	Dorchester County		
	Kent County		
Region 4	Queen Anne's County		
	Somerset County		
	Talbot County		
	Wicomico County		
	Worcester County		
	Calvert County		
	Charles County		
Region 5	Montgomery County		
	Prince George's County		
	St. Mary's County		

